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AF.X.	Application Number	10/676,839
TRANSMITTAL	Filing Date	9/30/2003
FORM	First Named Inventor	Salih B. Gokturk
(to be used for all correspondence after initial	• • • • • • • • • • • • • • • • • • • •	3736
	Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission	4 Attorney Docket Number	S01-264/US
	ENCLOSURES (Check a	II that apply)
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocati Change of Correspondence Terminal Disclaimer Request for Refund CD, Number of CD(s) Remarks	
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Firm Ron Jacobs Reg. No. 50 Individual name		
Signature		
Date	2-14-05	
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I hereby certify that this correspondence is t sufficient postage as first class mail in an er the date shown below.	peing facsimile transmitted to the USP velope addressed to: Commissioner f	PTO or deposited with the United States Postal Service with for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on
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Signature	Alan-	Date 3/14/0/5
This collection of information is required by 3 CFI process) an application. Confidentiality is governed	R 1.5 The information is required to obtain	or retain a benefit by the public which is to file (and by the USPTO to scollection is estimated to 12 minutes to complete, including

This collection of information is required by 3t CFR 1.5/ The information is fequired to obtain or retain a benefit by the public which is to file (and by the USP10 to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



Attorney Docket: S01-264/US

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Number:

10/676,839

Filing Date:

9/30/2003

Applicant:

Salih B. Gokturk

Application Title:

Three-Dimensional Pattern Recognition

Method to Detect Shapes in Medical Images

Examiner:

Not assigned

Art Unit:

3736

CORRECTION REQUEST

Commissioner for Patents P.O. Box 1450, Alexandria, VA 22313-1450

Dear Sir:

Kindly correct the inventor's name and residential city.

The inventor's name on the filing receipt reads: Acar Burak. However, his correct name should read **Burak Acar**.

The residential city on the filing receipt reads: Bebek, Turkey. This should be changed to read **Istanbul**, **Turkey**.

A marked-up version of the Filing Receipt is enclosed for your reference.

Very respectfully,

Ron Jacobs

(Reg. No. 50,142)



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PALO ALTO, CA 94306

United States Patent and Trademark Office

UNITED STATES DEPARTMENT OF COMMERCE United States Patent and Trademark Office Address COMMISSIONER FOR PATENTS P.O. Dox 1450 Alexandra, Vinginia 22313-1450

	APPL NO.	FILING OR 371 (c) DATE	ART UNIT	FIL FEE REC'D	ATTY.DOCKET NO	DRAWINGS	TOT CLMS	IND CLMS
1	0/676,839	09/30/2003	3736	666	S01-264/US	10	44	3

CONFIRMATION NO. 3053

UPDATED FILING RECEIPT

OC000000012714469

LUMEN INTELLECTUAL PROPERTY SERVICES, INC. 2345 YALE STREET, 2ND FLOOR

Date Mailed: 05/19/2004

Receipt is acknowledged of this regular Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Filing Receipt Corrections, facsimile number 703-746-9195. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Burak acar

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David S. Paik, Palo Alto, CA;

Domestic Priority data as claimed by applicant

This appln claims benefit of 60/415,269 09/30/2002

Foreign Applications

If Required, Foreign Filing License Granted: 12/19/2003

Projected Publication Date: 08/26/2004

Non-Publication Request: No

Early Publication Request: No

** SMALL ENTITY **

Title

Three-dimensional pattern recognition method to detect shapes in medical images

Preliminary Class

600

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